

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS2916AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/26/2009
NAME OF PROVIDER OR SUPPLIER PRESTIGE ASSTD LV AT HENDERSON		STREET ADDRESS, CITY, STATE, ZIP CODE 1050 E LAKE MEAD DR HENDERSON, NV 89015		
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Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 5/26/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for 70 Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was 56. Fifteen resident files were reviewed and eleven employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D.</p> <p>Complaint intake # NV00021920 was investigated and substantiated without deficiencies because of actions taken by the facility.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 070 SS=F	<p>449.196(1)(f) Qualifications of Caregiver-8 hours training</p> <p>NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility.</p>	Y 070		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 This Regulation is not met as evidenced by: Based on record review on 5/26/09, the facility failed to ensure that 6 of 12 caregivers received eight hours of annual training (Employee #3, #8, #9, #10, #11 and #12). Severity: 2 Scope: 3	Y 070		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review on 5/26/09, the facility failed to ensure 2 of 12 caregivers complied with NAC 441A.375 regarding tuberculosis testing (Employee #5, and #8). Severity: 2 Scope: 3	Y 103		
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include:	Y 105		

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Y 105	Continued From page 2 (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review on 5/26/09, the facility failed to ensure 7 of 12 caregivers met background check requirements (Employee #3, #5, #7, #9, #11, and #12). Severity: 2 Scope: 3	Y 105		
Y 106 SS=F	449.200(2)(a) Personnel File - 1st aid & CPR NAC 449.200 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1, (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation. This Regulation is not met as evidenced by: Based record review on 5/26/09, the facility failed to ensure the caregivers had current training in first aid and cardiopulmonary resuscitation (CPR) (Employee #6, and #9). Severity: 2 Scope: 3	Y 106		
Y 255 SS=F	449.217(6)(a)(b) Permits - Comply with NAC 446	Y 255		

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Y 255	<p>Continued From page 3</p> <p>NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.</p> <p>This Regulation is not met as evidenced by: Based on observation, interview and record review on 5/27/09, the facility failed to ensure the kitchen complied with the standards of NAC 446.</p> <p>Findings include:</p> <p>The wiping cloths used to sanitize equipment and food preparation surfaces were stored in a solution that did not contain the proper concentration of sanitizer.</p> <p>The lids of the large dry food storage bins holding flour and sugar were soiled with grease and food debris, and the base of the portable fan stored on a shelf directly over the food preparation table was soiled with food debris.</p> <p>The ceiling around the ceiling vents in the kitchen and dishwashing area were dusty and soiled.</p> <p>The alcove in the kitchen containing the ice</p>	Y 255		

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Y 255	Continued From page 4 machine did not have the required 20 foot candles of light. The cutting board on the cook's line in the kitchen was worn. It was not smooth and easily cleanable. The Frigidaire upright freezer and the toaster in the kitchen were not commercial grade/NSF approved or equivalent. The refrigerator/freezer, microwave, blender, and stove in the Memory Care Unit were not commercial grade/NSF or the equivalent. Severity 2, Scope 3	Y 255		
Y 698 SS=D	Residents Requiring use of Oxygen-Storage 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (b) ensure that: (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; This REQUIREMENT is not met as evidenced by: Based on observation on 5/26/09, the facility failed to stored safely 6 tanks of oxygen in a rack to prevent injury in 1 resident area of the facility (Resident #11). Severity: 2 Scope: 1	Y 698		
Y 859 SS=D	449.274(5) Periodic Physical examination of a resident	Y 859		

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Y 859	Continued From page 5 NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Based on record review on 5/26/09, the facility failed to ensure that 3 of 15 residents received an annual physical (Resident #1, #3 and #7). Severity: 2 Scope: 1	Y 859			
Y 878 SS=D	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order.	Y 878			

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Y 878	Continued From page 6 This Regulation is not met as evidenced by: Based on observation, interview and record review on 5/26/09, the facility would be unable to administer medications as prescribed for 2 of 15 residents because their medications were not available in the facility (Resident #1 and #9). Severity: 2 Scope: 1	Y 878		
Y 883 SS=D	449.2742(7) Medication / Resident Refusal NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed. This Regulation is not met as evidenced by: Based on interview and record review on 3/31/09, the administrator failed to ensure 4 of 15 resident physicians were notified within 12 hours after a dose of medication was missed or refused (Resident #4, #7, #9 and #11). Severity: 2 Scope: 1	Y 883		
Y 936 SS=F	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against	Y 936		

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Y 936	<p>Continued From page 7</p> <p>unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 5/26/09, the facility failed to ensure 2 of 15 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #5 and #8) which affected all residents.</p> <p>Severity: 2 Scope: 3</p>	Y 936		

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